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FOR ACTION

COUNTRY PROGRAMME RECOMMENDATION**

Honduras

SUMMARY

The present document contains a recommendation for funding the country programme of Honduras which has an annual planning level of $1,000,000 or less. The Executive Director recommends that the Executive Board approve the amount of $4,850,000 from general resources, subject to the availability of funds, and $10,701,000 in supplementary funds, subject to the availability of specific-purpose contributions, for the period 1996 to 2000.

* E/ICEF/1996/9.

** In order to meet documentation deadlines, the present document was prepared before aggregate financial data were finalized. Final adjustments, taking into account unspent balances of programme cooperation at the end of 1995, will be contained in the "Summary of 1996 recommendations for general resources and supplementary funding programmes" (E/ICEF/1996/P/L.43 and Add.1).

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BASIC DATA
(1994 unless otherwise stated)

Child population (millions, 0-15 years)	2.6
U5MR (per 1,000 live births)	54
IMR (per 1,000 live births)	41
Underweight (% moderate and severe) (1987)	21
Maternal mortality rate (per 100,000 live births) (1990)	220
Literacy (% male/female) (1990)	70/69
Primary school enrolment (% net, male/female) (1986)	88/93
Primary school children reaching grade 5 (%)	N/A
Access to safe water (%)	65
Access to health services (%) (1987)	64
GNP per capita (1993)	$600

One-year-olds fully immunized against:

tuberculosis:	95 per cent
diphtheria/pertussis/tetanus:	95 per cent
measles:	94 per cent
poliomyelitis:	95 per cent

Pregnant women immunized against:

tetanus:	88 per cent

THE SITUATION OF CHILDREN AND WOMEN

1. Confronted by a severe economic crisis in the 1980s, Honduras embarked on a programme of structural adjustment in 1990. About 64 per cent of Honduran households live in poverty, with the majority in peri-urban areas of Tegucigalpa and San Pedro Sula and in nine departments in southern and western Honduras where socio-economic indicators are below the national averages.

2. Honduras has ratified the Convention on the Rights of the Child and submitted its report to the Committee on the Rights of the Child in 1994. The Committee noted that limited public and institutional awareness about the Convention and the lack of legislative mechanisms for its full implementation need to be addressed.

3. As a follow-up to the World Summit for Children, a national programme of action (NPA) for children was prepared. Current trends indicate that Honduras should be able to achieve most of the mid- and end-decade goals. Immunization coverage has been increased and sustained at over 90 per cent. The vaccination of women of child-bearing age with tetanus toxoid has increased from 41 to 88 per cent and, in 1994, polio was eradicated and zero mortality due to measles was reported. Salt iodization has increased from 30 per cent in 1987 to 88 per cent, in 1994. Efforts with small salt producers should ensure that all salt will be iodized by 1996. Special efforts will be required to reach 80 per cent coverage using oral rehydration therapy (ORT).

4. Primary health service coverage has expanded, but the sustainability, quality and efficiency of services need to be strengthened to achieve the decade mortality reduction goals. The major causes of under-five mortality include acute respiratory infections (ARI), perinatal complications and diarrhoeal diseases. Low birth weight affects 9 per cent of all babies, and about 21 per cent of children suffer from severe and moderate malnutrition. Only 10 per cent of children are breast-fed exclusively during the first six months after birth.

5. The national maternal mortality rate (MMR) is estimated at 220 per 100,000 live births; however, MMR is double the national average in the departments of La Paz, Intibuca and Copan in the west of the country. Only 47 per cent of women of child-bearing age have access to family planning services. About 54 per cent of all births take place at home, with few attended by trained personnel. Honduras has the highest per capita level of HIV/AIDS cases in Central America, accounting for 57 per cent of the cases registered in the region. The number of women with HIV/AIDS has doubled over the last three years. Although the Convention on the Elimination of All Forms of Discrimination Against Women was ratified in 1982, Honduran women still lack equal access to credit, and labour and penal laws do not reflect the specific needs of women. The demand by organized women's groups for more gender-sensitive policies and legislation has yet to be acted upon by national congress.

6. Water supply and sanitation coverage has increased over the last five years, but many systems are in disrepair and hygiene education is weak. Most people who lack services live in rural or peri-urban areas. An expansion of coverage to those areas requires more sustainable strategies that emphasize local-level cost recovery and infrastructure maintenance.

7. The primary school system has a high enrolment at about 90 per cent; however, high repetition rates (23 per cent in the first grade) and only a 28 per cent school completion rate are indicators of the inefficiency of the system. Underlying causes for these include low preschool coverage (25 per cent in 1994), poor nutrition and inadequate early childhood stimulation, poorly motivated and trained teachers, limited distribution of educational materials and inflexible curricula. There are no significant gender differences in enrolment or completion rates.

8. Initiatives such as those to prepare municipal-level plans of action to meet national-level goals have shown that progress is greatest where national initiatives are complemented by cost-effective capacity-building initiatives that promote community empowerment at the subnational level. The Government's decentralization policy offers a special challenge for creating and strengthening appropriate subnational and local-level capacities for improved efficiency and quality of services benefiting women and children.

PROGRAMME COOPERATION, 1991-1995

9. The 1991-1995 programme of cooperation focused on building a strong base for Honduras to meet its commitments to the World Summit for Children and to implement the Convention on the Rights of the Child. Key advocacy and social mobilization activities sensitized government policy makers and other partners

to children's needs and rights and were instrumental in the preparation of the NPA, the establishment of a special unit in the Ministry of Planning - the National Social Indicators Bureau - to monitor progress towards NPA goals, launching of the Mayors "Pact for Children" initiative and commitment of 293 mayors to prepare municipal plans of action for children, and drafting of a new legal code for children based on the Convention.

10. Major achievements in health included communication and mobilization activities that helped to expand immunization coverage; the promotion and provision of oral rehydration salts which helped to increase national ORT coverage from 30 to 70 per cent and reduce child death due to diarrhoea; and the establishment of 250 rural "popular pharmacies" with essential drugs. The co-management of these services between the health system, non-governmental organizations (NGOs) and community groups has served as a model for community empowerment in health services. The safe motherhood initiative began in the Department of La Paz with the training of health workers and traditional birth attendants (TBAs) in early detection of high-risk pregnancies, studies of sexual practices among youth and a major communication campaign on AIDS prevention. Nutrition activities included a mobilization and communication strategy for the promotion of breast-feeding; launching of the Baby-Friendly Hospital Initiative (BFHI) in the largest three public hospitals; and the promotion of food fortification, including support to the Ministry of Health for monitoring compliance with existing legislation which has resulted in 88 per cent of all salt produced in the country being iodized and 34 per cent of all sugar fortified with vitamin A. Inter-agency coordination was important in the national expanded programme on immunization (EPI), HIV/AIDS and micronutrient interventions.

11. Using strategies of community-based management and maintenance of water supply systems and support from the subregional Central American water supply and sanitation programme have benefited 86,000 people in poor marginal areas of Tegucigalpa. This service delivery model includes cost recovery and community co-management of services, and is now considered a sustainable strategy for the expansion of water services to other peri-urban areas.

12. Expansion of non-formal preschool services reached 21,000 children in poor urban areas. A demonstration project improved the quality of education in 36 rural multigrade schools. Other achievements included the revision of school textbooks from a gender perspective and support to 1,700 rural schools for organizing summer head start programmes for children starting primary school, which benefited 26,000 children and reduced drop-out rates in the first year of school. This model of pre-primary school is now being expanded with the support of the World Bank.

13. The subregional programme on children in especially difficult circumstances supported the National Commission on Social Well-Being with alternative models of care for street children and working children. The sports for life initiative was successfully developed as a community-based model for preventive activities and has been expanded to other municipalities. Over the last two years, there has been a strong campaign to promote children's rights, and technical assistance has been provided to governmental bodies and NGOs for the preparation of a national legal Code for Children which is pending congressional approval.

Lessons learned

14. Major lessons learned include the following: (a) UNICEF has played an effective catalytic role through social mobilization and advocacy interventions; (b) the credibility of UNICEF with governmental institutions and other partners, including the mass media, places it in a strong position to promote child rights issues; (c) there is a need to reduce the geographic and programmatic dispersion of activities; (d) there is a need for greater precision in the development of annual programme objectives and the establishment of measurable progress indicators in order to monitor impact more effectively; (e) most successful and sustainable results have been obtained when subnational capacity-building initiatives have been reinforced with empowerment strategies, e.g. urban water supply strategy and "popular pharmacies"; and (f) water supply and sanitation interventions should be more gender-sensitive and place greater emphasis on hygiene education.

RECOMMENDED PROGRAMME COOPERATION, 1996-2000

Estimated annual expenditure
(In thousands of United States dollars)

	1996	1997	1998	1999	2000	Total
General resources						
Health and nutrition	120	150	150	150	150	720
Water supply and sanitation	45	50	50	50	50	245
Education	150	170	170	201	201	892
Children's rights	128	70	149	108	108	563
Women in development	85	100	100	100	100	485
Social mobilization and advocacy	150	180	180	180	180	870
Planning, monitoring and evaluation	95	168	100	100	100	563
Programme support	77	112	101	111	111	512
Subtotal	850	1 000	1 000	1 000	1 000	4 850
Supplementary funding						
Health and nutrition	900	901	780	780	780	4 141
Water supply and sanitation	500	500	415	415	415	2 245
Education	400	400	200	200	200	1 400
Children's rights	300	300	285	285	285	1 455
Women in development	200	200	120	120	120	760
Advocacy and social mobilization	200	200	100	100	100	700
Subtotal	2 500	2 501	1 900	1 900	1 900	10 701
Total	3 350	3 501	2 900	2 900	2 900	15 551

Objectives and strategies

15. The proposed country programme will focus on supporting the achievement of high priority goals of the NPA and implementation of the Convention on the Rights of the Child. As UNICEF resources are limited, priority will be given to (a) reducing under-five mortality due to diarrhoea and pneumonia; (b) increasing immunization coverage in areas where it is below the national average; (c) expanding initiatives for safe motherhood, particularly in six departments where MMR is highest; (d) promoting HIV/AIDS awareness and prevention for youth in principal cities; (e) promoting the universal fortification of salt with iodine and sugar with vitamin A; (f) improving the nutritional status of children under the age of two years; (g) improving the quality of primary education in rural multigrade schools; (h) expanding sustainable water supply and sanitation systems in rural communities and urban slum areas; and (i) supporting implementation of the new Code for Children and related laws.

16. The strategies for UNICEF assistance will focus on disparity reduction, with greater convergence of activities in nine departments (62 municipalities) in the south and western regions, and in selected peri-urban areas of Tegucigalpa, San Pedro Sula and La Ceiba where basic child health and education indicators are below the national averages. Advocacy and social mobilization at national and subnational levels will be central to the catalytic role UNICEF will play in the proposed programme. This strategy will cut across the entire programme. In addition, capacity-building at the municipal level will be based on the government decentralization policy. Community empowerment strategies will focus on co-management of services as well as empowering families with basic knowledge, skills and values for healthy living.

Health and nutrition

17. The programme will strengthen integral child health care strategies within the health sector through support for improving the quality of maternal and child health (MCH) services of the primary health care (PHC) system in nine departments. Major lines of intervention will include MCH, nutrition and HIV/AIDS prevention.

18. MCH objectives include (a) reducing diarrhoea- and ARI-related deaths by 30 per cent each; (b) increasing immunization coverage in 37 municipalities where coverage rates of 80 per cent have not been achieved; (c) strengthening and expanding the safe motherhood initiative in the departments of La Paz, Comayagua, Intibuca, Lempira, Ocotepeque and Copan; and (d) consolidating and expanding models of co-management of health services through an additional 400 popular pharmacies. NGOs will be important partners in this initiative, which will also incorporate other PHC interventions such as growth and development monitoring and the promotion of ORT.

19. UNICEF will provide support for the in-service training of health workers, TBAs, parents and community health volunteers; logistical support and training of local development council members in planning, monitoring and social mobilization; and essential drugs.

20. Nutrition priorities will include (a) the promotion of exclusive breast-feeding for the first six months and improved child feeding practices of children under the age of two years; (b) growth and development activities in

six departments where the prevalence of malnutrition is highest; and (c) support for the expansion of BFHI to all 21 hospitals in the country. Activities will include the training of health personnel, parents and health volunteers; the provision of scales and height meters; and the development of educational and promotional materials.

21. In collaboration with the Pan American Health Organization/Institute of Nutrition of Central America and Panama (PAHO/INCAP), UNICEF will cooperate with salt and sugar producers and the Ministry of Health to improve the fortification process and to strengthen national capacity for monitoring the quality of salt iodization and fortification of sugar with vitamin A.

22. HIV/AIDS prevention activities have been planned in coordination with the Joint United Nations Programme on HIV/AIDS and will include the training of teachers, health personnel, social communicators and youth in basic concepts of prevention. Innovative social communication and mobilization strategies using various media such as popular theater and puppets will focus on youth in the high-risk areas of San Pedro Sula, Ceiba, Tegucigalpa.

Water supply and sanitation

23. This programme, which will be implemented within the framework of the subregional water supply and sanitation programme, will strengthen the capacity of the Honduran water authorities to expand water supply and sanitation coverage in underserved rural communities and peri-urban areas using already successful, sustainable, low-cost capacity-building and service delivery strategies. Strengthening local government capacity to monitor, plan and maintain these services with community co-management and cost recovery will be vital. Service delivery will benefit 150,000 urban and 50,000 rural people in the Valley of Sula and selected rural communities in the south-western region.

24. Hygiene education, gender equity and other relevant empowerment approaches needed to maintain and operate these systems will be addressed. UNICEF will help to train communities, teachers, health personnel and NGOs working in these areas.

Education

25. The primary objective of this programme is to consolidate and expand successful, local-level initiatives which improve the quality of rural education services and reduce primary school drop-out and repetition rates. These initiatives should have a demonstration effect that can influence national education policies and attract major multilateral donor funding. UNICEF will support the expansion of 960 non-formal preschool centres benefiting 14,000 children in municipalities with the highest primary school repetition rates and provide technical assistance for improving the quality of education in 34 rural multigrade schools using the "active school" methodology which encourages children to plan and implement their learning activities. Activities will include teacher training, the development of training and didactic materials, and the provision of essential supplies and equipment.

Children's rights

26. Government/UNICEF cooperation will continue to create the necessary legal and institutional mechanisms for implementing the Convention on the Rights of the Child. Major strategies will include legislative reform, institutional strengthening of the Instituto Nacional del Niño y de la Familia (INNFA) (Institute for the Child and the Family) and training of 293 municipal child defenders of the Convention who will create greater public awareness of relevant legislation and monitor its implementation.

27. UNICEF will provide technical assistance to the Commissioner for Children's Rights and other relevant bodies for the formulation of legislation that is coherent with the proposed new legal code for children and adolescents, e.g. adoption procedures, treatment of children in conflict with the law and abandoned children. UNICEF will also support the design of educational materials and the training of judges, policemen, NGO staff and INNFA personnel on the Convention and related legislation.

Women in development

28. While gender issues are a part of all programmes, the objectives are to ensure consistency between existing policies and legislation (e.g. penal, family and labour codes) and the Convention on the Elimination of All Forms of Discrimination Against Women and to strengthen the negotiation and mobilization capacity of NGOs and women's organizations through training in leadership skills. UNICEF will provide technical assistance to the Women's Bureau, the Congressional Commission on Women and NGOs for the review and formulation of legislation that will improve women's legal rights.

Advocacy, communication and social mobilization

29. The programme will cultivate sustainable governmental, NGO, community and private sector leadership for achieving the NPA goals, mobilizing increased public and private resources for children and strengthening the rights of children and women on the political, economic and social agenda of state and civil society. All advocacy and social mobilization elements of the country programme will be strengthened through more effective and mutually reinforcing communication strategies. UNICEF will support studies to improve policies related to, for example, child labour and violence. Promoting children's rights will be enhanced through partnerships with the mass media, including the training of social communicators and the dissemination of messages on existing and proposed policies and legislation.

Local planning, monitoring and evaluation

30. The cooperation will strengthen the capacity of the National Social Indicators Bureau to monitor progress towards the achievement of the NPA goals, as well as information systems for collecting data disaggregated by gender and age-group. Within the framework of the Mayors "Pact for Children", technical support will be provided to 62 municipal development councils for the preparation of municipal plans of action, including systems for monitoring progress of goals, training of personnel in survey and data collection techniques, planning, monitoring, and the provision of essential computer equipment for use at subnational levels.

31. Joint UNICEF/Government annual programme reviews and a mid-term evaluation of the programme with the National Social Indicators Bureau will help to adjust programmes to respond to challenges and assess the appropriateness of the selected strategies. In addition, annual plans of action with clearly defined annual objectives and targets will facilitate monitoring of progress and accountability.

Cooperation with other agencies and non-governmental organizations

32. UNICEF will continue to collaborate closely with other United Nations and bilateral agencies. Cooperation with the United Nations Population Fund will focus on safe motherhood and reproductive health activities. With the World Health Organization/PAHO/INCAP, the focus will be on EPI, the control of diarrhoeal diseases and ARI, and micronutrient activities. A country strategy note for Honduras has not as yet been prepared; however, the United Nations Development Programme and other United Nations agencies and bilateral partners have been invited by UNICEF to participate at critical stages of the current country programme preparation process. Both national and international NGOs will be important partners in this programme, both in the promotion of children's rights and for reaching vulnerable groups.